Larry Hogan, Governor · Boyd K. Rutherford, Lt. Governor · Robert R. Neall, Secretary

Office of Health Care Quality 7120 Columbia Gateway Drive, 2nd Floor, Columbia, MD 21046

INITIAL AND CHOW APPLICATION PACKET FOR COMPREHENSIVE CARE & EXTENDED CARE FACILITIES REQUIRED DOCUMENTATION

An initial application packet, consisting of the items noted below, may be submitted electronically or in paper, to the Long-Term Care unit of the Office of Health Care Quality for review and approval. Please submit your application using the following link on the Long Term Care Dashboard:

https://app.smartsheet.com/dashboards/ccHh455hgWv8MfQVXHF4rH3c63J72HGm3xrqQ4P1

The application packet must include all required documentation, original signatures and notary on the appropriate forms. Please click the links to be directed to the associated document.

If you need additional information or questions, please call 410-402-8201.

- A. <u>Initial/CHOW Application</u>
- B. Principal Physician Agreement & Relief Physician Agreement
- C. Director of Nursing Agreement
- D. Provider Ownership and Control Disclosure Form
- E. State Affidavit
- F. Workers' Compensation Law Questionnaire
- G. Certificate of Compliance, as applicable
- H. Evidence of Financial Ability to Operate (Alternative Formats permitted)
- I. Adverse Legal Actions/Convictions
- J. Chain Home Office Information
- K. Form CMS 671 Long Term Care Facility Application for Medicare and Medicaid
- L. Proof of Submission of Civil Rights Compliance
- M. <u>CMS 1561 Health Insurance Benefits Form -Two originals required.</u> (For Medicare Facilities)
- N. Copy of Policies and Procedures
- O. Transfer Agreement with a Local Hospital
- P. Notice of completion of CHOW A letter documenting the date the transaction occurred.
- O. Compliance History Form
- R. Certificate of Need (or exemption) from the Maryland Health Care Commission (MHCC). You will need to apply to the MHCC for a pre-certification review. We require a copy of their review and approval or exemption.